CDC/ATSDR:

AN OVERVIEW

The Department of Health and Human Services (HHS) is the principal agency in the United States government for protecting the health and safety of all Americans and for providing essential human services, especially for those people who are least able to help themselves. HHS comprises 13 major operating components, of which the Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR) are two.

CDC, which was founded in 1946, has remained at the forefront of public health efforts to prevent and control infectious and chronic diseases, injuries, workplace hazards, disabilities, and environmental health threats. CDC is globally recognized for conducting research and investigations. CDC is also action-oriented—it applies research and findings to improve people's daily lives and responds to health emergencies—something that distinguishes CDC from its peer agencies. Today CDC is recognized as the federal agency for

- protecting people's health and safety,
- providing reliable health information for the public,
- improving health through strong partnerships.

ATSDR was established in 1980 by the Comprehensive Environmental Response, Compensation, and Liability Act—also known as Superfund. ATSDR works to prevent exposures to hazardous wastes and to environmental spills of hazardous substances. Headquartered in Atlanta, the agency also has 10 regional offices and an office in Washington, D.C., and a multidisciplinary staff of about 400 persons, including epidemiologists, physicians, toxicologists, engineers, public health educators, health communication specialists, and support staff.

Although CDC and ATSDR have independent visions and mission statements, both strive to protect and improve the health of the American public. The Director of CDC also serves as the Administrator of ATSDR.

This annual report provides information about CDC's and ATSDR's principal financial statements for fiscal year 2001 (see pages 63–129), including a consolidating balance sheet, a consolidating





statement of changes in net position, a consolidating statement of net cost, a consolidated statement of financing, and a combined statement of budgetary resources. It also serves as an overview to CDC/ATSDR and as a guide to selected program activities and accomplishments during 2001.

WORKFORCE AND ORGANIZATION

The workforce at CDC and ATSDR comprises approximately 8,500 employees in 170 occupations with a public health focus, including physicians, statisticians, epidemiologists, laboratory experts, behavioral scientists, and health communicators. This culturally and ethnically diverse workforce represents a cross section of American



society. CDC supports staff development and training through intramural programs, such as the CDC Corporate University, and through training and education opportunities that range from attending workshops and seminars to completing advanced degrees. A CDC-wide mentoring program fosters other valuable but less formal training. Constantly improving its workforce—the agency's most crucial and complex resource—ensures that CDC can better serve the public.

Because of its talents, training, and diversity, this workforce is well-positioned to serve the American public, to meet the health goals for our nation as set forth by the Department of Health and Human Services in *Healthy People 2000* and *Healthy People 2010*, and to respond to disease outbreaks and health crises worldwide. Although many people associate CDC with its national headquarters in Atlanta, more than 2,000 CDC employees work at other locations throughout the United States. Additional CDC staff are deployed to more than 37 other countries, assigned to 47 state health departments, and dispersed to numerous local health agencies on both long- and short-term assignments.

CDC's major organizational components respond individually in their areas of expertise and also pool their resources and expertise on crosscutting issues and specific health threats. In 2001, the agency comprised these 11 major program components:

- National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) prevents premature death and disability from chronic diseases and promotes healthy personal behaviors.
- National Center for Environmental Health (NCEH) provides national leadership in preventing and controlling disease, disability, and death that result from the interactions between people and their environment.
- National Center for Health Statistics (NCHS) provides statistical information that will guide actions and policies to improve the health of the American people.
- National Center for Infectious Diseases (NCID) prevents illness, disability, and death caused by infectious diseases in the United States and around the world.
- National Center for Injury Prevention and Control (NCIPC)
 prevents death and disability from nonoccupational injuries,
 including those that are unintentional and those that result
 from violence.
- National Institute for Occupational Safety and Health (NIOSH) ensures safety and health for all people in the workplace through research and prevention.
- National Center for HIV, STD, and TB Prevention (NCHSTP) provides national leadership in preventing and controlling human immunodeficiency virus infection, sexually transmitted diseases, and tuberculosis.

- National Immunization Program (NIP) prevents disease, disability, and death from vaccine-preventable diseases among children and adults.
- National Center on Birth Defects and Developmental Disabilities (NCBDDD) works to prevent birth defects and secondary disabilities.
- Epidemiology Program Office (EPO) strengthens the public health system by coordinating public health surveillance; providing support in scientific communications, statistics, and epidemiology; and training in surveillance, epidemiology, and prevention effectiveness.
- Public Health Practice Program Office (PHPPO) strengthens community practice of public health by creating an effective workforce, building information networks, conducting practice research, and ensuring laboratory quality.

PROTECTING THE HEALTH AND SAFETY OF AMERICANS

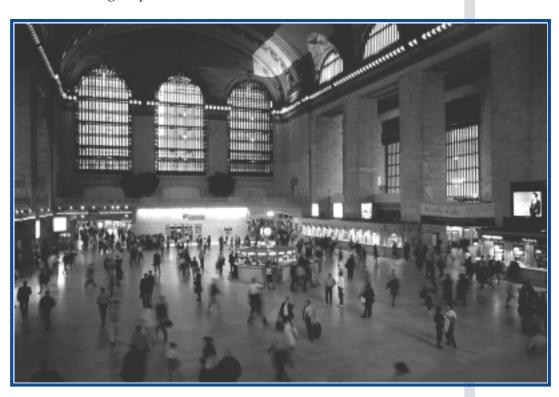
Improvements in sanitation and the prevention of diseases through vaccines are credited with dramatic gains in life expectancy, gains that occurred because of public health actions. A century ago, pneumonia and tuberculosis were the two leading causes of death in the United States. Then in the 1940s, a critical focus of our nation's health priorities was the control of malaria among military personnel during World War II. From these programs came the genesis of the Centers for Disease Control and Prevention. Since its inception, CDC has been at the forefront of efforts to improve the health and well-being of Americans. But the scope and range of those efforts has greatly expanded since CDC's inception.

Today the ever-expanding catalog of serious threats to the health and well-being of our nation's population includes emerging and documented diseases; viruses, fungi, and other organisms; unintentional injuries and violence; and birth defects and disabilities. This catalog would be incomplete without also including risky health behaviors and uninformed decisions; threats from bioterrorism; genetic engineering; and access to health care and health information.

CDC dedicates many resources toward solving those complex, crosscutting health problems. Tackling such problems requires a broad array of skills, abilities, and experience. CDC must be able to direct research, adapt resources, and balance priorities as needed; employ diverse tactics for preventing and responding to health

threats; and forge effective public and private partnerships. CDC and its partners confront challenges that reinforce, reshape, and expand the traditional roles of public health agencies. Responding to these challenges involves such activities as

- investigating disease outbreaks in the United States and around the world;
- preparing for and responding to terrorist events;
- probing the realms of viruses, bacteria, and parasites in seeking ways to control both emerging and reemerging pathogens;
- protecting the food and water supply from both inadvertent and deliberate contamination;
- curbing the toll of death and disability from preventable injuries;
- stemming the epidemic of obesity in the United States;
- convincing the public that altering certain behaviors will yield long-term health dividends;
- educating our young people about the risks of HIV, unintended pregnancy, tobacco use, physical inactivity, and poor nutrition;
- translating biomedical research findings into practice in communities;
- eliminating disparities in the health of all Americans.



PROVIDING CREDIBLE HEALTH AND SAFETY INFORMATION

Having up-to-date, credible information about health and safety readily available is essential for people across all stages of life and health practitioners to make rational decisions, decisions that have both immediate and long-term implications. CDC has internationally recognized expertise and credibility in disciplines such as public health surveillance, epidemiology, statistical analysis, laboratory investigation and analysis, health communications and social marketing, behavioral risk reduction, technology transfer, and prevention research. CDC is well-suited to develop and disseminate credible and practical health information that helps make our food supply safer, identifies harmful behaviors, and improves our environment.

CDC/ATSDR relies on various means to make this crucial health information widely and immediately available, including Internet Web sites and e-mail; books, periodicals, and monographs; health and safety guidelines; reports from investigations and emergency responses; public health monitoring and statistics; travel advisories; and answers to public inquiries.

In addition to serving the public, CDC delivers critical health information to public health officials and to health providers. For instance, the practicing medical and dental communities and the nation's health care providers receive numerous official CDC recommendations concerning the diagnosis and treatment of disease, immunization schedules, infection control, and clinical prevention practices. CDC offers technical assistance and training to health professionals as well.

CDC/ATSDR is positioned in the vanguard of efforts to spread the word about having children wear bicycle helmets, teaching young women about preventing birth defects by taking folic acid, quitting smoking, eating sensibly and exercising regularly, making sure children are vaccinated, alerting the public to environmental hazards, and numerous other public health messages that need either to be heard for the first time or to be reinforced.

PROMOTING HEALTH THROUGH STRONG PARTNERSHIPS

Throughout its history, CDC has recognized the significance of developing and sustaining vital partnerships with various public and private entities that improve and expand the scope of public health services for the American people. CDC's numerous partners in conducting effective prevention and control activities include

- public health associations;
- state and local public health departments;
- practicing health professionals, including physicians, dentists, nurses, and veterinarians;
- schools and universities;
- communities of faith;
- community, professional, and philanthropic organizations;
- nonprofit and voluntary organizations;
- business, labor, and industry;
- the CDC Foundation and other foundations;
- international health organizations;
- state and local departments of education.

CDC's partners implement most of the agency's extramural programs, programs that are tailored to reflect local and community needs. These myriad partners also contribute by serving as consultants to CDC program staff, by sitting on advisory bodies at CDC, and by attending CDC-sponsored seminars and conferences. These diverse perspectives serve to generate new opportunities for collaborations, help shape key strategies, and provide another means for staying focused on the needs of the American public. Sustaining these partnerships requires tremendous coordination and communication.

In 2001, about 75% of CDC's budget (\$4.7 billion)—provided through extramural grants, cooperative agreements, and program contracts—was spent on public health work performed by CDC's partners. CDC dispersed most of those funds to state and local health departments as grants and cooperative agreements to be used for supporting and developing public health programs to prevent and control diseases and injuries. In addition, CDC funds extramural research through such programs as the Prevention Research Centers Program, which supports a prevention research agenda at 24 schools of public health throughout the country.